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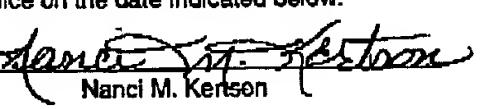MAIL STOP AMENDMENT

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VIA FACSIMILE – 571-273-8300
10 pages

FEE AUTHORIZATION / AMENDMENT TRANSMITTAL	Attorney's Docket No: 2519-US-NP

Serial No. 09/302,863	Filing Date April 30, 1999	Examiner D. Romeo	Group Art Unit 1647

In Re Application of Raymond G. Goodwin and Wanwan S. Din

For METHODS OF USE OF THE TACI/TACI-L INTERACTION

TO THE COMMISSIONER FOR PATENTS:

☒ Applicant(s) request(s) the following extension of time under 37 CFR 1.136(a):

  ☐ One month of original due date ($120.00)
  ☐ Two months of original due date ($450.00)
  ☒ Three months of original due date ($1,020.00)
  ☐ Four months of original due date ($1,590.00)
  ☐ Five months of original due date ($2,160.00)

☒ A response in connection with the matter for which this extension is requested:

  ☒ is filed herewith.

  ☐ has been filed.

  ☐ The response is the filing of a continuing application, the prior application having an express abandonment conditioned on the granting of a filing date to the continuing application.

☒ The accompanying papers include amended claims for which no additional fee is required.

☐ The accompanying papers include amended claims the fee for which has been calculated as follows:

CLAIMS AS AMENDED

(1)	(2) Claims remaining After amendment	(3)	(4) Highest number Previously paid for	(5) No. of Extra claims present	(6) Rate	(7) Additional Fee
Total Claims		Minus	=	0	x $50	= $ 0.00
Indep. Claims		Minus	=	0	x $200	= $ 0.00
☐ First Appearance of a multiple dependent claim					+ $360	= $ 0.00
			Total Additional Fee for this Amendment			$ 0.00

*   If the entry in column 2 is less than the entry in column 4, write "0" in column 5.
**   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
***   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
    The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col 1. of a prior amendment or the number of claims originally filed.

☐ The following other fees are incurred by the accompanying papers.

  ☐ Other: _____

☒ Please charge Deposit Account No. 09-0089 in the name of Immunex Corporation in the amount of $1020.00. A duplicate copy of this petition is attached.

☒ If an additional extension of time is required, please consider this a request therefore.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 09-0089.

Please Send Future Correspondence To:

22932

Immunex Corporation
Law Department
1201 Amgen Court West
Seattle, Washington 98119-3105
(206) 265-7000

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Phone: (206) 265-7145
Date: February 8, 2007

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on the date indicated below.

Signed: _____   Date: Feb. 8, 2007
Nanci M. Kertson

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